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PTO/SB/05 (12/97)
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UTILITY PATENT APPLICATION TRANSMITTAL Only for new nonprovisional applications under 37 CFR 1.53(b)	Attorney Docket No.	21336-703	Total Pages	35 32
	First Named Inventor or Application Identifier			
	Peter H. van der Veen; Title: <i>Symmetric Multiprocessor System And Method</i>			
	Express Mail Label No.	EL324593814 US		


APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
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<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages <u>18</u>] (preferred arrangement set forth below)</p> <ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R&D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings- Detailed Description- Claim(s)- Abstract of the Disclosure <p>3. <input checked="" type="checkbox"/> Drawing(s) (37 CFR 1.152) [Total Sheets <u>7</u>]</p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages <u>3</u>]</p> <p>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]</p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p>	<p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Copy</p> <p>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</p> <p>c. <input type="checkbox"/> Statement verifying identify of above copies</p> <p>8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & documents(s)) (3 pages)</p> <p>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement [] Power of Attorney (when there is an assignee)</p> <p>10. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>11. <input type="checkbox"/> Information Disclosure Statement (IDS)PTO-1449 [] Copies of IDS Citations</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>14. <input type="checkbox"/> Small Entity Statement filed in prior application, Statement(s) [] Status still proper and desired</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Other:</p>
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17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. ___/___

16. CORRESPONDING ADDRESS

<input type="checkbox"/> Customer Number of Bar Code Label		 (Insert Customer No. or Attach bar code label here)		<input checked="" type="checkbox"/> Correspondence address below	
NAME	Kent R. Richardson				
	Registration No.: 39,443 PATENT TRADEMARK OFFICE				
ADDRESS	WILSON SONSINI GOODRICH & ROSATI				
	650 Page Mill Road				
CITY	Palo Alto	STATE	California	ZIP CODE	94304-1050
COUNTRY	USA	TELEPHONE	(650) 493-9300	FAX	(650) 845-5000

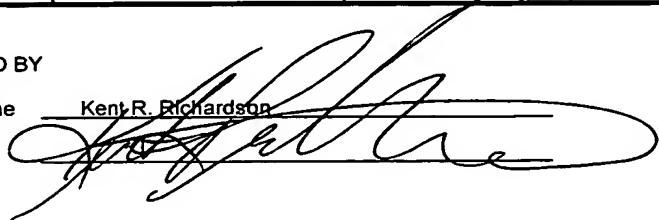
SUBMITTED BY

Typed or

Printed Name

Kent R. Richardson

Signature



Reg. Number 39,443

Date

8/25/99

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146	790	246	395	Filing a submission after final rejection (37 CFR 1.129(a))																																																																																																																																																																																																																																																																																																																																																					
149	760	249	380	For each additional invention to be examined (37 CFR 1.129(b))																																																																																																																																																																																																																																																																																																																																																					
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Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.